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Image# 15951121960

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An A	uthoriz	ed Com	mittee			Office U	Jse Only	
1. NAME OF COMMITTEE (in		TYPE OR PRINT	Γ ▼		ample: If typin er the lines.	g, type	12FE4M5	5		
Janice Kovach	for Con	gress	1 1 1						1 1 1 1 1	
ADDRESS (number ar	nd street)	196 West State	Street							
_			<u> </u>							
Check if dif than previous reported. (A	usly	Trenton					NJ L	08608		
2. <b>FEC IDENTIFIC</b>	CATION NU	MBER ▼		CITY			STATE A		ZIP CODE A STATE ▼ DIST	FRICT
C C0055498	30			THIS EPORT	× NEW	OR	AMENE (A)	DED		07
4. TYPE OF RE	PORT (Cha	ose One)	(b) 12	-Day <b>PRF</b> -	-Election Repo	rt for the				
(a) Quarterly R	eports:		(-) 12				П		П	
X April 15	Quarterly R	eport (Q1)		ш	Primary (12P)		General (*	12G)	Runoff (1	2R)
D bluds	Overstant D				Convention (	12C)	Special (1	2S)		
	Quarterly Re	y Report (Q3)	El	ection on	M M /	D D	YYYY		in the State of	
January	/ 31 Year-End	d Report (YE)	(c) 30	-Day <b>POS</b>	<b>T</b> -Election Rep	ort for the	<u> </u>			
					General (30G	)	Runoff (30	OR)	Special (3	30S)
Termina	ation Report	(TER)	El	ection on	M M /	D D	YYYY		in the State of	
5. Covering Period	M 01	/ D1 /	Y Y 201		through	M 03	31		) 15	
I certify that I have e	examined thi	s Report and to	the bes	t of my kn	owledge and l	belief it is	true, correct and	d comp	lete.	
Type or Print Name	of Treasurer	Peter D Nicho	ls							
Signature of Treasure	er <u>Peter</u>	D Nichols			[Electronically 1	Filed]	Date 04	/ D	10 / Y Y Y 2015	
NOTE: Submission of	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.									
Office				-						
Use Only									<b>C FORM 3</b> evised 02/2003)	

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

	, i	
<b>Janice</b>	Kovach for	Congress

01 03 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 73555.33 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 250.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 73305.33 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 39.87 110011.07 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 39.87 110011.07 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 4547.18 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 72691.89 Schedule C and/or Schedule D).....

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

PAGE 3 / 12

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

### Janice Kovach for Congress

Report Covering the Period: From: 01 01 2015 To: May 7 2015

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
I1. C	ONTRIBUTIONS (other than loans) FROM:			
(a	Individuals/Persons Other Than     Political Committees			
	(i) Itemized (use Schedule A)	0.00	39095.00	
	(ii) Unitemized	0.00	16177.00	
	(iii) TOTAL of contributions from individuals	0.00	55272.00	
(b	,	0.00	0.00	
(C	c) Other Political Committees (such as PACs)	0.00	11583.33	
(c (e	TOTAL CONTRIBUTIONS	0.00	6700.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	73555.33	
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	2500.00	
	OANS:			
(a	Made or Guaranteed by the Candidate	0.00	45000.00	
(b	o) All Other Loans	0.00	0.00	
(C	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	45000.00	
	FFSETS TO OPERATING			
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00	
	THER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	121055.33	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 12

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	39.87	110011.07
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	250.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	250.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	39.87	110261.07
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	4587.05
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		4587.05
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	39.87
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		4547.18

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS				I I		FOR LINE NUMBER: PAGE 5 OF 12 (check only one)			
						X   17   18   19a   19b   20a   20b   21			
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.			
\	AME OF COMM	, ,							
/ -	Janice Kova	ch for Congres	SS						
Full Name (Last, First, Middle Initial)  A. Sage Payment Solutions					Date of Disbursement				
_						M M / D D / Y Y Y Y			
M	lailing Address 1	1750 Old Meadow Ro	ad			01 02 2015			
	ity IcLean		State VA	Zip Code 22102		Amount of Each Disbursement this Period			
P	urpose of Disbur	rsement	• • • • • • • • • • • • • • • • • • • •	22102		4.87			
_	Processing Fee				001	Transaction ID : SB17.4157			
		ach for Congres	ss		Category/ Type				
0	ffice Sought:	X House Senate	Disbursement For Primary	: 2014					
		President	Other (s						
	tate: NJ	District: 07 First, Middle Initial)							
	•	ent Solutions				Date of Disbursement			
Mailing Address 1750 Old Meadow Road					M M / D D / Y Y Y				
IV	aming Addicess	1750 Old Meadow Ro	ad			01 05 2015			
	ity //cLean		State VA	Zip Code 22102		Amount of Each Disbursement this Period			
P	urpose of Disbur	rsement		22102		35.00			
Processing Fee 001 Candidate Name				Transaction ID : SB17.4158					
		ach for Congre			Category/ Type				
0	ffice Sought:	X House Senate	Disbursement For Primary	: 2014 General					
		President	Other (s						
	tate: NJ	District: 07 First, Middle Initial)							
). ).	un Marrie (Last, 1	irst, wilder miliary				Date of Disbursement			
	lailing Address					M M / D D / Y Y Y			
_	Talling Address								
С	ity		State Zi	p Code		Amount of Each Disbursement this Period			
P	urpose of Disbur	rsement							
C	andidate Name				Category/				
_	· · ·		Disk		Type				
0	ffice Sought:	House Senate	Disbursement For Primary	: General					
		President	Other (s						
S	tate:	District:							
SHI	RTOTAL of Dieb	ursements This Page	(optional)			39.87			

TOTAL This Period (last page this line number only).....

39.87

#### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a		
	13b		

12

Detailed Summary Page Transaction ID: SC/10.4133 NAME OF COMMITTEE (In Full) Janice Kovach for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Janice Kovach General Mailing Address Other (specify)  $\blacktriangledown$ 4 Mitchell Lane City State ZIP Code NJ 08809 Clinton Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 13<sup>D</sup> <sup>M</sup>06<sup>M</sup> ž014 0.00 On Demand % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**1mage# 15951121966** PAGE 7 / 12

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: SC/10.4133

Candidate Loan - Personal Funds

Form/Schedule: Transaction ID:

#### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a
	13h

12

Detailed Summary Page Transaction ID: SC/10.4131 NAME OF COMMITTEE (In Full) Janice Kovach for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Janice Kovach General Mailing Address Other (specify)  $\blacktriangledown$ 4 Mitchell Lane City State ZIP Code NJ 08809 Clinton Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 07<sup>M</sup> <sup>D</sup>12 ž014 0.00 On Demand % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) ...... 45000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**1mage# 15951121968** PAGE 9 / 12

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DCF HZ'G7 < 98 I @ 'CF' ± H9 A ± N5 H± C B

Form/Schedule: SC/10 Transaction ID: SC/10.4131

Candidate Loan - Personal Funds

Form/Schedule: Transaction ID:

## SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 10 OF FOR LINE NU (check only o

UMBER:	_		
one)			9
	5	<	10

12

NAME OF COMMITTEE (In Full)

J	anice Kovach for Con	gress			
	A. Full Name (Last, First, Middle Initial) of Debte	or or Creditor			Nature of Debt (Purpose):
	Apollo Political LLC				Political/Communications Consulting Services
ŀ	Mailing Address 1914 Windham Lane				
	1914 William Lane				
	City State	Zip Code			
ŀ	Silver Spring	MD	20902		
	Outstanding Balance Beginning This Period				Transaction ID : SD10.4136
	17691.89				
	Amount Incurred This Period	Pay	ment This Period		Outstanding Balance at Close of This Period
	0.00			0.00	17691.89
	9 9	7	7		9 9
	B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor			Nature of Debt (Purpose): Political/Fundraising Consulting Services
	Keenyo Consultants LLC				Folitical/Furidialsing Consulting Services
f	Mailing Address 204 Normandy Road				
	·				
	City State Edison	Zip Code NJ	08820		
ŀ	Outstanding Balance Beginning This Period				Transaction ID : SD10.4140
					Transaction is . OS 10.4140
	3500.00				
	Amount Incurred This Period	Pay	ment This Period		Outstanding Balance at Close of This Period
	0.00			0.00	3500.00
ŀ	C. Full Name (Last, First, Middle Initial) of Debt	or or Craditor			
	Strategic Message Managemen				Nature of Debt (Purpose): Political/Communications Consulting Services
	Mailing Address 15 Alden Street				
-	City	State	Zip Code		
	Cranford	NJ	07016		
	Outstanding Balance Beginning This Period				Transaction ID : SD10.4142
	6500.00				
	Amount Incurred This Period	Pav	ment This Period		Outstanding Balance at Close of This Period
	0.00	1 4)	The Fine Fine	0.00	6500.00
	0.00		7	0.00	0300.00
1)	SUBTOTALS This Period This Page (optional)				27691.89
٥,	TOTALO TEL POLICIO (C. C. C				27691.89
2)	TOTALS This Period (last page this line number	r only)		<b>&gt;</b>	7
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page of	nly)		45000.00
					72691.89
4)	ADD 2) and 3) and carry forward to appropriate	e line of Summa	ary Page (last page	only)	.1551.00

**1mage# 15951121970** PAGE 11 / 12

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SD10 Transaction ID: SD10.4136

Total amount of debt is subject to negotiation.

Form/Schedule: SD10 Transaction ID: SD10.4140

Total amount of debt is subject to negotiation.

**1mage# 15951121971** PAGE 12 / 12

### : 97 'A = G7 9 @ G B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SD10 Transaction ID: SD10.4142

Total amount of debt is subject to negotiation.

Form/Schedule: Transaction ID: